

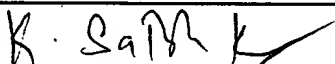


B / TFW

2116

Sample Form (03-04)

AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY

In re Application of: LEWIS A. MORROW											
Application No. 09/755,861											
Filed: JANUARY 5, 2001											
Title: SYSTEM FOR SCHEDULING EXECUTION OF A TASK ON ONE OF A PLURALITY OF PROCESSORS HAVING DIFFERENT ENERGY EFFICIENCIES											
Attorney Docket No. YOR9-2000-0472US1 (8728-416)		Art Unit: 2116									
<p>The practitioner named below is authorized to conduct interviews and has the authority to bind the principal concerned. Furthermore, the practitioner is authorized to file correspondence in the above-identified application pursuant to 37 CFR 1.34:</p> <table border="1"><thead><tr><th>Name</th><th>Registration Number</th></tr></thead><tbody><tr><td>Frank Chau</td><td>34,136</td></tr><tr><td>Frank V. DeRosa</td><td>43,584</td></tr><tr><td>Koon Hon Wong</td><td>48,459</td></tr></tbody></table>				Name	Registration Number	Frank Chau	34,136	Frank V. DeRosa	43,584	Koon Hon Wong	48,459
Name	Registration Number										
Frank Chau	34,136										
Frank V. DeRosa	43,584										
Koon Hon Wong	48,459										
<p>This is not a Power of Attorney to the above-named practitioner. Accordingly, the practitioner named above does not have authority to sign a request to change the correspondence address, a request for an express abandonment, a disclaimer, a power of attorney, or other document requiring the signature of the applicant, assignee of the entire interest or an attorney of record. If appropriate, a separate Power of Attorney to the above-named practitioner should be executed and filed in the United States Patent and Trademark Office.</p>											
SIGNATURE of Practitioner of Record											
Name	Satheesh Karra										
Signature		Date	July 13, 2005								
Registration Number	40,246	Telephone	914-945-2488								

This form offers a sample or suggested format for an authorization of a practitioner who is not of record. See MPEP § 713.05 for more information. This sample form is not an OMB officially approved form.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.